

Please type a plus sign (+) inside this box → ☐**TRANSMITTAL  
FORM**

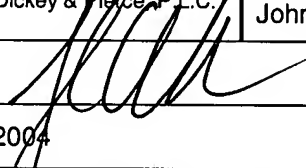
(to be used for all correspondence after initial filing)

Application Number	10/059,270
Filing Date	January 31, 2002
Inventor(s)	Claus E. FURST
Group Art Unit	2819
Examiner Name	P. Wamsley
Attorney Docket Number	45900-000548/US

**ENCLOSURES (check all that apply)**

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input checked="" type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment<br><input checked="" type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input checked="" type="checkbox"/> Letter to the Official Draftsperson and five (5) Sheets of Formal Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><br><input type="checkbox"/> LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/clean version of pending claims)<br><br><input type="checkbox"/> Appeal Communication to Group (Notice of Appeal, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <b>Remarks</b>  |  |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name John A. Castellano	Reg. No. 35,094
Signature			
Date	April 5, 2004		

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**FEE TRANSMITTAL  
for FY 2003**

Patent fees are subject to annual revision.

**Complete if Known**

Application Number	10/059,270
Filing Date	January 31, 2002
Inventor(s)	Claus Erdmann FURST
Examiner Name	p. Wamsley
Group Art Unit	2819
Attorney Docket No.	45900-000548/US

TOTAL AMOUNT OF PAYMENT (\$) 110.00

**METHOD OF PAYMENT (check one)**
☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
Deposit  
Account  
Number

08-0750

Deposit  
Account  
Name

Harness, Dickey &amp; Pierce, P.L.C.

☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status.  
See 37 CFR 1.27
2. ☒ Payment Enclosed:
☒ Check    ☐ Credit card    ☐ Money  
Order    ☐ Other
**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$ 0)

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
20 **			
Independent Claims	-3 **		
Multiple Dependent			

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	1053	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110.00
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 110.00)

\*\*or number previously paid, if greater; For Reissues, see above

**SUBMITTED BY**

Name (Print/Type)

John A. Castellano

Registration No. Attorney/Agent)

35,094

Telephone

703-668-8000

Signature

Date

April 5, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PATENT  
45900-000548/US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Claus E. FURST Conf. No.: 5415  
Serial No.: 10/059,270 Group Art: 2819  
Filed: January 31, 2002 Examiner: P. Wamsley  
FOR: SIGMA DELTA MODULATOR HAVING ENLARGED DYNAMIC  
RANGE DUE TO STABILIZED SIGNAL SWING (As Amended)

**AMENDMENT AFTER FINAL**

BOX AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

April 1, 2004

Dear Sir:

Responsive to the Official Action dated December 5, 2003, the period of response having been extended one (1) month to April 5, 2004, the following amendments and remarks are respectfully submitted in connection with the above-referenced application.

**Amendments to the Claims** begin on page two (2) of this Amendment.

04/06/2004 SMINASS1 00000113 10059270

01 FC:1251

110.00 OP